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31423 7590 01/03/2005

JAMES M. SKORICH
 377 ABW/JAN
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 KIRTLAND AFB, NM 87117-5773



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Libby G. Waits	(Depositor's name)
<i>Libby G. Waits</i>	(Signature)
1/20/05	(Date)

01/26/2005 ZJUHR2 00000101 010465 10764806

01 FC:1501 1400.00 DA
 02 FC:1504 300.00 DA
 03 FC:8000 0.00 DA

PUBLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/764,806	01/26/2004	Donald A. Shiffler JR.	PRS072-DIV	4438

TITLE OF INVENTION: METHOD OF MAKING A FIELD EMISSION COLD CATHODE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	04/04/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHEN, BRET P	1762	427-058000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. JAMES M. SKORICH

2. _____
 3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

THE UNITED STATES OF AMERICA AS
 REPRESENTED BY THE SECRETARY OF THE
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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

WASHINGTON, D.C.

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☒ Government

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- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature

James M. Skorich

Date

1-20-05

Typed or printed name

JAMES M. SKORICH

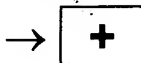
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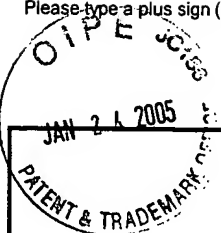
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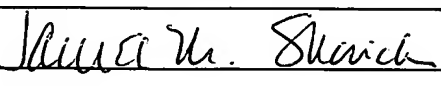
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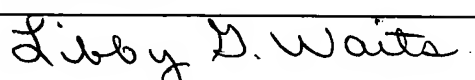


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 <h2 style="text-align: center;">TRANSMITTAL FORM</h2> <p style="text-align: center;"><i>(to be used for all correspondence after initial filing)</i></p>	Application Number	10/764,806	
	Filing Date	01/26/2004	
	First Named Inventor	Donald A. Shiffler, Jr.	
	Group Art Unit	1762	
	Examiner Name	Bret P. Chen	
Total Number of Pages in this Submission	3	Attorney Docket Number	PRS072-DIV

ENCLOSURES <i>(check all that apply)</i>		
<input checked="" type="checkbox"/> Issue Fee Transmittal Form <input type="checkbox"/> Fee Attached Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts / Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> Copy of Issue Fee Transmittal Form Return Receipt Postcard </div>
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SIGNATURE OF APPLICANT, ATTORNEY OR AGENT	
Firm or Individual Name	JAMES M. SKORICH, Reg. No. 27,594
Signature	
Date	1/20/05

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			1/20/05
Typed or printed name	Libby G. Waits		
Signature		Date	1/20/05